SHRF
SASKATCHEWAN
HEALTH RESEARCH
FOUNDATION

2014-15 Annual Report

SASKATCHEWAN HEALTH RESEARCH FOUNDATION

www.shrf.ca

Vision:

A globally relevant health research community that supports the needs of the people of Saskatchewan

Mission:

SHRF leads and shapes health research for the province of Saskatchewan

Values:

SHRF places value on excellence and integrity in everything we do. We work collaboratively, are transparent and ethical, and responsive and accountable to the people of Saskatchewan.

Mandate:

As defined in The Saskatchewan Health Research Foundation Act (2002), SHRF's mandate is comprised of the following elements:

- Seek and receive funding to support and advance health research
- Encourage and facilitate health research
- Assist Minister in developing a provincial strategy
- Fund research according to the strategy
- Disseminate information about funded research

Saskatchewan Health Research Foundation (2014-15)

Patrick Odnokon,
Interim Chief Executive Officer

Shaz Azam,
Director of Finance

Irene Blum,
Accountant

Gail Fredrickson,
Director of Communications and Outreach

Karen Glazebrook,
Director of Funding Programs

Lynn Nastiuk,
Executive Coordinator

Pamela Riffel,
Communications Coordinator

Tanya Skorobohach,
Programs Coordinator

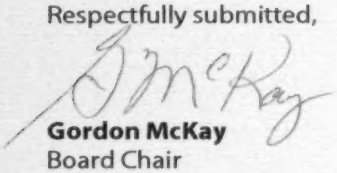
Kathryn Thompson,
Knowledge Mobilization Officer

Letter of Transmittal

The Honourable Dustin Duncan
Minister of Health
Legislative Assembly
Regina, SK S4S 0B3

I am pleased to submit for your consideration the annual report of the Saskatchewan Health Research Foundation for the fiscal period April 1, 2014 to March 31, 2015.

Respectfully submitted,



Gordon McKay
Board Chair

Table of Contents

2 Board Chair Letter
3 CEO Letter
4 Agency Overview
4 Governance
5 Peer Review
8 Year at a Glance
27 Financial Statements

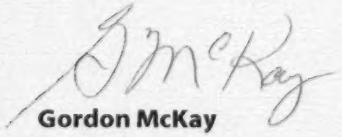
Letter from Board Chair

Saskatchewan residents continue to demonstrate strong commitment to health research and health innovation as revealed through SHRF's participation in the fifth national public opinion poll in the Canada*Speaks* series. SHRF's portfolio transfer from the Ministry of Health to Innovation Saskatchewan brings an exciting change for the organization that allows SHRF to continue as a leader in funding, facilitating and promoting innovative, collaborative health research in the province. With change still very much on the horizon, SHRF is working to implement a new strategic plan that ensures our objectives increase research capacity and community engagement, and measure and demonstrate impact.

As part of SHRF's commitment to fund impactful research vital to healthy communities, we recognize the importance of fostering collaborative partnerships and stakeholder engagement. This year was no exception as SHRF procured new and renewed partnerships, launched a new pilot funding program, and demonstrated the impact of ongoing research. SHRF was pleased to establish a new funding partnership with the Lung Association of Saskatchewan, developed to co-fund asthma research in the province, while also renewing the funding of the $1 million Research Chair in Alzheimer's Disease and Related Dementia – through a partnership with the Alzheimer Society of Saskatchewan – awarded to Dr. Darrell Mousseau from the University of Saskatchewan. In addition, SHRF partnered with CIHR on a variety of relevant national initiatives and team grant funding opportunities. SHRF's new Collaborative Innovative Development grant program is intended to provide support for collaborative health research in its initial stages, and we are excited that this program has sparked such interest from stakeholders and the research community.

While SHRF continues to build and broaden the province's research capacity, we believe it is equally important to report to community on the health research being conducted along with its current and potential impact. SHRF's most recent publication, *Weechihitotan (Let's help and support each other) – The Value of Aboriginal Health Research in Saskatchewan* is a collection of case studies that tell the stories of some of the Aboriginal health research underway in Saskatchewan. With the province's growing and diverse population, SHRF uses the input from community partners, researchers, and research institutes to inform our policies and programs so that they better reflect their needs and wishes. The communities' ability to direct, gather, analyze, and incorporate the knowledge that results from health research places it intimately closer to the impact and outcome of health research activity than many other types of research.

On behalf of SHRF's Board of Directors, I want to extend our appreciation to Patrick Odnokon for acting as Interim CEO this past year. Patrick has kept the organization on track and moving forward during this time of transition. I will also take this opportunity to welcome our two new Board members, Craig Chamberlin from the Faculty of Kinesiology and Health Studies at the University of Regina and Tami Denomie, Executive Director from the Ministry of Health, Government of Saskatchewan. Finally, I would like to thank SHRF's staff and management for their ongoing dedication and commitment to operational excellence.



Gordon McKay
Board Chair

CEO Letter

These are exciting times for health research in Saskatchewan. Never before have we had the infrastructure (e.g., the new Health Sciences building at the U of S, the Canadian Light Source, and the newly constructed Research and Innovation Centre at the U of R), the capacity found across the outstanding faculties at the U of S, U of R, Saskatchewan Polytechnic, and the provincial health regions, and the committed engagement to research by our provincial government, Board of Directors, stakeholders and end-users in addressing and resolving key issues in a truly Saskatchewan way.

SHRF has embraced the challenges and welcomed the opportunities that go along with change. We are putting into action a new strategic plan that will position this agency as a catalyst and leader across the health research enterprise in Saskatchewan. We continue to invest in strategies that build health research capacity, increase stakeholder engagement, measure the impact of health research, and develop additional funding partnerships and programs. SHRF strives to be flexible and responsive and to that end we are constantly exploring and integrating new ideas critical to meeting these objectives. An example of this is the launch of our new Collaborative Innovation Development grant program. This pilot program was developed to encourage collaborative groups of health researchers to launch new ideas, develop new research questions, and explore unique solutions to health issues relevant to Saskatchewan. The new program has been received extremely well by the research community and other key stakeholders across the province.

SHRF continues to advocate for the value of strong partnerships. The benefit of our partnership efforts goes beyond the dollars available. These opportunities allow us to maximize our investment in health research and leverage the sharing, promotion, and impact of health research. Alongside gains made with current partners, SHRF aims to identify and engage new research partners to develop additional, sustainable funding dollars and opportunities for expanded resources. Accordingly, we are launching a new initiative which will see SHRF host a collaborative session among not-for-profit leaders in the health sector. Our vision for this session is to facilitate a gathering that enhances collaboration, increases knowledge, and creates synergies among organizations with similar successes, challenges, and needs.

In closing, I would like to acknowledge the transition of SHRF's portfolio. Effective April 1, 2015, ministerial responsibility for SHRF, including its provision of annual grant funding, transferred to Innovation Saskatchewan. The transition offers the organization an opportunity to further advance collaborative relationships with industry partners and end-users, and places a strong focus on the outcomes and impacts of our funded research. SHRF will continue to work with the Ministry of Health in addressing priorities of the health systems as we continue to fund, facilitate, and promote health research in Saskatchewan. Finally, thank you to everyone who has contributed to the ongoing progress of SHRF, including government, researchers, board, partners, collaborators, and staff. As we plan for exciting changes over the new fiscal year, we acknowledge and greatly appreciate the trust, investment, commitment, and support which continue to serve as key elements in our foundation and help guide our strategy and future development.

Patrick Odnokon
Interim Chief Executive Officer

Agency Overview

SHRF is the provincial agency responsible for funding, facilitating, and promoting innovative, collaborative health research in Saskatchewan. SHRF works as a catalyst, driver, and leader to: build and broaden the province's research capacity; expedite the production and sharing of knowledge; increase stakeholder engagement; generate new and diverse funding partnerships; and measure the impact of health research on our Saskatchewan communities.

Governance

Board of Directors

A Board of Directors guides the activities of SHRF. Membership can be drawn from the health research community, government, health delivery system, business, and public at large.

A Governance Framework and Policies document sets out the Board's governance philosophy, its processes, and policies for managing the affairs and business of SHRF.

Membership consists of not more than 12 members who are appointed by the Lieutenant Governor in Council and who hold office for a term not exceeding three years, renewable once. Each board member also serves on a board committee. Currently, SHRF has two standing committees – Governance, and Finance and Audit.

In 2014-15, a total of four board meetings were held. Figures in brackets indicate the number of meetings each board member attended.

Terry Baker (1) (Chair until April 9, 2014)
Private business, Farming

Gordon McKay (4) (Chair as of June 25, 2014)
University of Saskatchewan

Don Somers (4) (Vice Chair as of June 25, 2014)
Private business, Consulting

William Albritton (4)
University of Saskatchewan

Brent Brownlee (4)
Saskatchewan Ministry of Advanced Education

Beth Horsburgh (4)
University of Saskatchewan
Saskatoon Health Region

Shanthi Johnson (3)
University of Regina

David Katz (3)
Innovation Saskatchewan

Tom Porter (4)
Private business, Consulting

Robert Sheldon (3) (from June 25, 2014)
University of Calgary

Cecile Hunt (1) (from June 25, 2014)
Prince Albert Parkland Health Region

Sylvia Abonyi (2)
University of Saskatchewan

Andrew Greenshaw (1) (until April 9, 2014)
University of Alberta

Kathleen Peterson (2)
Saskatchewan Ministry of Health

Craig Chamberlin (newly appointed)
University of Regina

Tami Denomie (newly appointed)
Ministry of Health

Peer Review

Grant selection processes are founded on expert peer review, where committees of active researchers and health professionals assess research proposals using excellence, relevance, and feasibility as key deciding factors. The peer review process ensures the question or problem being researched is important and original, the approach taken is ethical and likely to contribute to our understanding of the issue, and the applicants have the appropriate expertise and support to conduct the research.

Applications must also exemplify the stated objectives and priorities for the particular funding program as outlined in the program description. Committees provide feedback and suggestions to the applicants, and rate the applications based on excellence in each stated criteria. Only applications that are rated by the panel as very good, excellent, or outstanding are eligible for funding.

Our reviewers are not only instrumental in evaluating applications; they also provide valuable insight to SHRF about procedures, programs, practices, and trends in the health research community.

Peer review for programs where SHRF is partnering with other funding agencies may be done by the other agency, so long as SHRF requirements are met.

Steps in Grant Selection

1. SHRF invites reviewers to serve on committees
2. Applicants submit applications to SHRF
3. SHRF staff screen applications for completeness and eligibility
4. Review committee chair, with SHRF staff, assigns applications to reviewers
5. Reviewers prepare in-depth assessments based on program criteria and excellence
6. Committee meets to discuss, rate, and rank all applications
7. Committee recommends meritorious applications for funding
8. SHRF Board reviews and approves the committee's recommendations
9. SHRF offers grants and awards to as many recommended applicants as resources permit
10. SHRF staff ensures all conditions are met before authorizing payments to researchers' home institutions

Peer Review Committee Membership 2014-15

In 2014-15 the following peer reviewers provided their expertise on a volunteer basis. Committee membership is typically for a three-year term.

Figures in parentheses indicate number of years served, including current year.

BIOMEDICAL FELLOWSHIP REVIEW COMMITTEE

Darrell Mousseau (Chair) (4)
Department of Psychiatry
College of Medicine
University of Saskatchewan

Camelia Adams (1)
Department of Psychiatry
College of Medicine
University of Saskatchewan

Ildiko Badea (3)
College of Pharmacy and Nutrition
University of Saskatchewan

Rajni Chibbar (1)
Department of Pathology and Laboratory Medicine
College of Medicine
University of Saskatchewan

Emily Jenkins (2)
Department of Veterinary Microbiology
Western College of Veterinary Medicine
University of Saskatchewan

Scot Leary (1)
Department of Biochemistry
College of Medicine
University of Saskatchewan

Helen Nichol (1)
Department of Anatomy and Cell Biology
College of Medicine
University of Saskatchewan

Dae-Yeon Suh (3)
Department of Chemistry and Biochemistry
Faculty of Science
University of Regina

Heather Wilson (2)
Vaccine and Infectious Disease Organization
University of Saskatchewan

BIOMEDICAL ESTABLISHMENT GRANT REVIEW COMMITTEE

Keith Bonham (Chair) (2)
Saskatchewan Cancer Agency

Scot Stone (Vice-Chair) (2)
Department of Biochemistry
College of Medicine
University of Saskatchewan

Veronica Campanucci (3)
Department of Physiology
College of Medicine
University of Saskatchewan

Linda Chelico (1)
Department of Microbiology and Immunology
College of Medicine
University of Saskatchewan

Tanya Dahms (3)
Department of Chemistry and Biochemistry
Faculty of Science
University of Regina

Philip Griebel (2)
Vaccine and Infectious Disease Organization
School of Public Health
University of Saskatchewan

Edward Krol (4)
College of Pharmacy and Nutrition
University of Saskatchewan

SOCIO-HEALTH, SYSTEMS, AND CLINICAL REVIEW COMMITTEE

Donna Goodridge (Chair) (2)
Division of Respirology, Critical Care and Sleep Medicine
College of Medicine
University of Saskatchewan

Cathy Arnold (2)
School of Physical Therapy
College of Medicine
University of Saskatchewan

Roy Dobson (3)
College of Pharmacy and Nutrition
University of Saskatchewan

Rachel Engler-Stringer (2)
Department of Community Health and Epidemiology
College of Medicine
University of Saskatchewan

Robin Evans (1)
Faculty of Nursing
University of Regina

Jon Farthing (3)
College of Kinesiology
University of Saskatchewan

John Gjevre (2)
Division of Respirology, Critical Care and Sleep Medicine
College of Medicine
University of Saskatchewan

Gerri Lasiuk (2)
Faculty of Nursing
University of Alberta

Joshua Lawson (1)
Canadian Centre for Health and Safety in Agriculture
College of Medicine
University of Saskatchewan

Vivian Ramsden (1)
Department of Family Medicine
College of Medicine
University of Saskatchewan

Ulrich Teucher (2)
Department of Psychology
College of Arts and Science
University of Saskatchewan

COLLABORATIVE INNOVATION DEVELOPMENT GRANTS 2014-15 PILOT BIOMEDICAL REVIEW COMMITTEE

Vivian Mushahwar (Chair)
Division of Physical Medicine and Rehabilitation
Department of Medicine
University of Alberta

Silvia Cardona
Department of Microbiology and Medical Microbiology
Faculty of Medicine
University of Manitoba

Valerie Chappe
Department of Physiology and Biophysics
Dalhousie University

Tom Hobman
Department of Cell Biology
Faculty of Medicine and Dentistry
University of Alberta

Michael Jonz
Department of Biology
Faculty of Science
University of Ottawa

Olga Kovalchuk
Department of Biological Sciences
University of Lethbridge

Etienne Leygue
Manitoba Institute of Cell Biology

Leigh Anne Swayne
Division of Medical Sciences
University of Victoria

Matthias Schmidt
Department of Diagnostic Radiology
Faculty of Medicine
Dalhousie University

COLLABORATIVE INNOVATION DEVELOPMENT GRANTS 2014-15 PILOT CLINICAL REVIEW COMMITTEE

Michelle Porter (Chair)
Faculty of Kinesiology & Recreation Management
University of Manitoba

Anthony Chan
Department of Pediatrics
Faculty of Health Sciences
McMaster University

Brian Christie
Division of Medical Sciences
University of Victoria

Shyamala Dakshinamurti
Neonatal Pulmonary Biology Lab
Manitoba Institute of Child Health

Marc Grynpas
Division of Pathology
Mount Sinai Hospital

Amanda Newton
Department of Pediatrics
Faculty of Medicine and Dentistry
University of Alberta

Alison Novak
Toronto Rehabilitation Institute

Greg Wohl
Department of Mechanical Engineering
School of Biomedical Engineering
McMaster University

COLLABORATIVE INNOVATION DEVELOPMENT GRANTS 2014-15 PILOT: HEALTH SERVICES AND POPULATION HEALTH - GROUP 1 REVIEW COMMITTEE

Alexander Clark (Chair)
Faculty of Nursing
University of Alberta

Joan Almost
School of Nursing
Faculty of Health Sciences
Queen's University

Malcolm Doupe
Department of Community Health Sciences
Faculty of Medicine
University of Manitoba

Elizabeth Kristjansson
Faculty of Social Sciences
School of Psychology
University of Ottawa

Deborah Marshall
Department of Community Health Sciences
Faculty of Medicine
University of Calgary

Maria Mathews
Health Policy/Health Care Delivery
Faculty of Medicine
Memorial University of Newfoundland

Sheri Lynn Price
School of Nursing
Dalhousie University

COLLABORATIVE INNOVATION DEVELOPMENT GRANTS 2014-15 PILOT HEALTH SERVICES AND POPULATION HEALTH - GROUP 2 REVIEW COMMITTE

Alexander Clark (Chair)
Faculty of Nursing
University of Alberta

Rachelle Ashcroft
School of Social Work
University of Waterloo

Maureen Connolly
Department of Kinesiology
Faculty of Applied Health Sciences
Brock University

Marion Maar
Department of Medical Anthropology
Laurentian University

Maryam Sharifzadeh-Amin
School of Dentistry
Faculty of Medicine and Dentistry
University of Alberta

Jennifer Walker
School of Human and Social Development
Faculty of Applied and Professional Studies
Nipissing University

Year at Glance

In 2002, SHRF was legislated to assist the Minister of Health in developing a provincial strategy for health research (The Saskatchewan Health Research Foundation Act, 2002) and to support research according to this strategy. The subsequent 10-year provincial health research strategy ended in 2014 and SHRF is building upon the learning to determine the new strategy. We've incorporated feedback from key stakeholders to shape a transition plan for the organization until a new multi-year strategic plan is approved. In addition, SHRF's portfolio move to Innovation Saskatchewan means the strategy will emphasize relationships with industry partners and other non-traditional research collaborators. SHRF Board and Management are also working to create a provincial health research strategy, which will include recommendations from those surveyed across the research enterprise, and continue to keep our focus on the needs of the Saskatchewan people.

SHRF's 2014-15 Annual Report is structured around the three main business strategies employed by the organization:

1. Funding and Partnerships;
2. Communications and Outreach; and
3. Impact Analysis and Evaluation.

Funding and Partnerships

SHRF will use its assets and resources to focus on areas of need, while capitalizing on areas of strength, and developing a robust health research capacity in Saskatchewan. SHRF engages key stakeholders for input and guidance on its activities to continuously connect with and adapt to the needs of Saskatchewan people and the health research community.

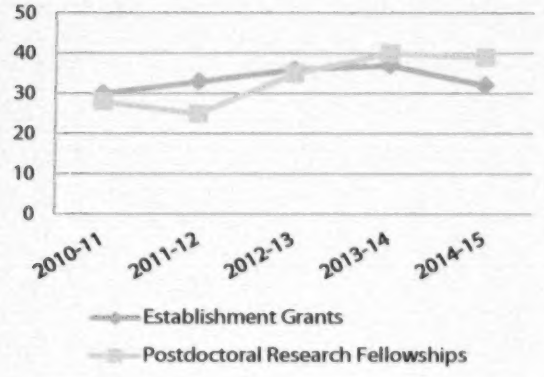
The Board approved $3.9 million for new research grants and fellowships. For details, please reference tables on page 17 and 19.

SHRF Programs

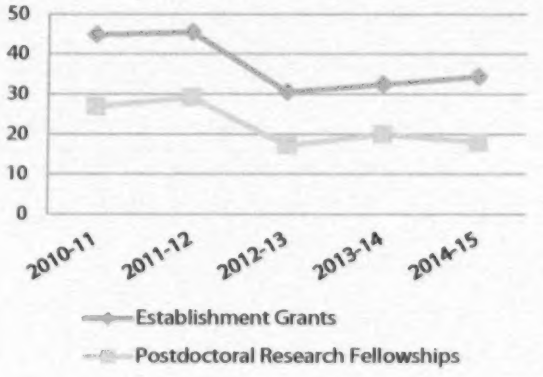
Employing the learning from our stakeholder consultations in 2014, SHRF and the Board are developing recommended changes to our strategy and suite of programs to allow for improved flexibility and researcher access while continuing to advance provincial health research priorities. Demand for program support is strong and growing. In 2014, SHRF signed a Memorandum of Understanding (MOU) with Saskatchewan Polytechnic and Regina Qu'Appelle Health Region (RQHR). SHRF will continue to consult with government and other key stakeholders about innovative ways to address and support the growth.

Our long-standing programs saw similar demand in 2014-15 and with similar funding levels the success rates remained about level compared to recent years.

Number of applications by program and year



Percent success rates by program and year



Postdoctoral Research Fellowships 2014-15

SHRF's Postdoctoral Research Fellowship program offers a full-time training opportunity for high-quality candidates in health-related fields. Fellows are supervised by experienced, active researchers to further develop their research skills that will equip them for a career in health research.

SHRF also partners with agencies to increase the amount of funding available and build capacity in specific research areas. In 2014-15, SHRF offered the Crohn's and Colitis Postdoctoral Fellow, co-funded by Crohn's and Colitis Canada.

The following are the seven recipients of a Research Fellowship in 2014-15:

Yalena Amador Cañizares
Supervised by Joyce Wilson
Microbiology and Immunology
Medicine
University of Saskatchewan
Mechanistic Analysis of miR-122 promotion of HCV replication

Lei An
Supervised by John Howland
Physiology
Medicine
University of Saskatchewan
Effects of maternal immune activation during pregnancy on patterns of brain activity in the offspring: implications for schizophrenia

Wubin Cheng
Supervised by James Johnston, David Cooper
Mechanical Engineering
Engineering
University of Saskatchewan
Revealing the role of mechanical factors on bone remodelling: a longitudinal study linking in vivo fatigue loading, advanced imaging and finite element modelling

Amanda Froehlich Chow
Supervised by Louise Humbert
Kinesiology
University of Saskatchewan
Increasing Early Childhood Educator Self-Efficacy to Promote Physical Literacy and Physical Activity Among Children in Rural Childcare Centres

Jonathan Pasternak
Supervised by Heather Wilson
Vaccine and Infectious Disease Organization
University of Saskatchewan
Development of an Oral Vaccine Platform for Neonates

Juan-Nicolas Pena-Sanchez
Crohn's and Colitis Postdoctoral Fellow, co-funded by Crohn's and Colitis Canada
Supervised by Gary Teare, Lisa Lix, and Jennifer Jones
Gastroenterology
Medicine
University of Saskatchewan
Assessing quality of care for patients with inflammatory bowel diseases (IBD) and evaluating the impact of the Multidisciplinary IBD Clinic in Saskatchewan: a population-based cohort study using administrative data

James Vlasblom
Supervised by Mohan Babu
Chemistry and Biochemistry
Science
University of Regina
Mapping the mammalian neurodegenerative disease-associated protein-protein interactome

These 2013-14 SHRF Research Fellowship recipients were successful in receiving national Tri-Agency funding in lieu of SHRF funding, therefore, SHRF awarded them a salary top-up award.

Azadeh Hatef
Supervised by Suraj Unniappan
Veterinary Biomedical Sciences
Veterinary Medicine
University of Saskatchewan
Nesfatin-1 Integration of Reproduction and Metabolism

John Schellenberg
Supervised by Janet Hill
Veterinary Microbiology
Veterinary Medicine
University of Saskatchewan
Defining clinical relevance of gardnerella vaginalis subgroup B in HIV infection by analysis of molecular systems during co-culture with vaginal epithelial cells

Establishment Grants 2014-15

SHRF's Establishment Grants are awarded to university research faculty who are new or newly resident in Saskatchewan. The grant aims to help them establish independent health research programs within the province and achieve the research productivity necessary to obtain longer-term and more substantial funding from other sources.

The following are the eleven recipients of an Establishment Grant in 2014-15:

Darryl Adamko
Pediatrics
Medicine
University of Saskatchewan
Metabolomic analysis of urine: Improving the diagnosis of asthma and COPD

Camelia Adams
Psychiatry
Medicine
University of Saskatchewan
Nature and nurture: A biopsychosocial exploration of the relationship between childhood trauma, adult attachment, and severity of depression and social anxiety in Saskatchewan

Lane Bekar
Pharmacology
Medicine
University of Saskatchewan
Glucocorticoid effects on acute neuroinflammation and chronic neurodegeneration

Josef Buttigieg
Biology
Science
University of Regina
Role of pulmonary neuroendocrine cells in lung physiology

Hector Caruncho
Pharmacy and Nutrition
University of Saskatchewan
Analysis of membrane protein clustering in lymphocytes as a putative biomarker of therapeutic efficacy in mood disorders

Sharyle Fowler
Gastroenterology
Medicine
University of Saskatchewan
The impact of chronic inflammation and its treatment on determinants of health in women with inflammatory bowel disease and their offspring

Continued...

Bridget Klest
Psychology
Arts
University of Regina
History of Exposure to Traumatic Stress and Health Care Experiences

Stephan Milosavljevic
Physical Therapy
Medicine
University of Saskatchewan
Walking away from low back pain: One step at a time

Shelley Peacock
Nursing
University of Saskatchewan
A psychosocial intervention for bereaved spousal caregivers of persons with dementia: Adapting the "Finding Balance" tool

Erika Penz
Respirology, Critical Care and Sleep Medicine
Medicine
University of Saskatchewan
Cost Effectiveness of Lung Cancer Screening in Saskatchewan - Applying Microsimulation Modeling and Saskatchewan-specific Costs of Lung Cancer Diagnosis and Management

Ian Stavness
Computer Science
Arts and Science
University of Saskatchewan
Simulation-based assessment and experimental evaluation of movement retraining to improve stability during walking

Collaborative Innovation Development Grants

In 2014-15, SHRF offered a pilot funding program developed to encourage collaborative groups of health researchers to launch new ideas, develop new research questions, and explore unique solutions to health issues relevant to Saskatchewan.

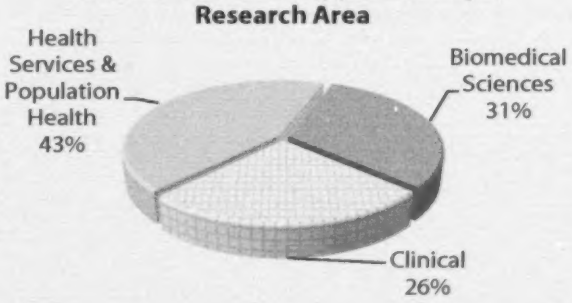
Grants are up to $40,000 for one year to support research development projects. The funding is intended to provide support for collaborative health research in its initial stages that will strengthen an application for funding to an entity other than SHRF within one year following the grant term. To be eligible, there must be a minimum of three applicants working together on the proposal and plans for the subsequent funding request. Researchers are encouraged to work with knowledge user co-applicants and collaborators where appropriate.

The pilot program received 74 applications with 24 successful teams being awarded funding through the inaugural Collaborative Innovation Development Grant competition.

The success rate was 32%. Applications came from all eligible institutions (52 from the University of Saskatchewan, 14 from the University of Regina, 7 from Regina Qu'Appelle Health Region, and 1 from Saskatchewan Polytechnic) and spanned all areas of research (see pie chart).

Three of the Collaborative Innovation Development Grants are co-funded by the Lung Association of Saskatchewan, a new partnership formed with SHRF to support asthma research in the province.

CID Grants 2014-15 Applications per Research Area



The grant recipients are part of a collaborative team, but the list below only identifies the principal investigators and their affiliation. For a full list of recipients, please see our website.

Ebin Arries
Nursing
University of Regina
Strengthening Inter-Professional Ethics Education Practices of Nursing and Social Work Professionals in Saskatchewan: Deepening Understandings of Ethical Issues and Early Indicators

Ildiko Badea
Pharmacy and Nutrition
University of Saskatchewan
Development of theranostic agents for melanoma

Josef Buttigieg & David Kopriva
Biology
Science
University of Regina
Determination of Matrix Metalloproteinase Expression in Symptomatic and Asymptomatic Human Carotid Artery Tissue

Andrew Cameron
Biology
Science
University of Regina
Tracking the Transmission of Bacterial Infections with Whole Genome Sequencing

Veronica Campanucci
co-funded by The Lung Association of Saskatchewan
Physiology
Medicine
University of Saskatchewan
RAGE mediates neurogenic airway hypersensitivity in asthma

Brian Chartier & Tracey Carr
Psychology
Arts and Science
University of Saskatchewan
Assessing the Healing Needs of Former Students of Indian Residential Schools and their Families

Jo-Anne Dillon
Vaccine and Infectious Disease Organization
University of Saskatchewan
Developing a Point-of-Care Diagnostic Platform for Antibiotic Resistant Bacterial Infections in Saskatchewan

Rachel Engler-Stringer & Kevin Stanley
Community Health and Epidemiology
Medicine
University of Saskatchewan
Nutrition Inequity in the Inner City: Using Smartphones to Study Diet and Food Access

Thomas Fisher
Physiology
Medicine
University of Saskatchewan
The role of the PLC delta1 isoform in the osmotic regulation of vasopressin release from supraoptic neurons

John Gordon
co-funded by The Lung Association of Saskatchewan
Respirology, Critical Care and Sleep Medicine
Medicine
University of Saskatchewan
Optimizing dendritic cell immunotherapy for asthma

Gary Groot
Surgery
Medicine
University of Saskatchewan
Shared Decision Making in Early Stage Breast Cancer: The Development of a Culturally Competent Conceptual Framework Applicable for Aboriginal Patients

Troy Harkness & Terra Arnason
Anatomy and Cell Biology
University of Saskatchewan
In vivo and in vitro evaluation of patient-derived breast cancer cells for early detection and treatment of drug resistant tumors

Richard Huntsman
Pediatrics
Medicine
University of Saskatchewan
Cannabidiol in Children with Refractory Epileptic Encephalopathy: A Phase 1 Open Label Dose Escalation Study

Joshua Lawson
co-funded by The Lung Association of Saskatchewan
Canadian Centre for Health and Safety in Agriculture
Medicine
University of Saskatchewan
An investigation of personal exposure monitoring and environmental exposures in relation to rural areas and asthma among children

Continued...

Anne Leis & Leanne Smith
Community Health and Epidemiology
Medicine
University of Saskatchewan
Breast Health Care in Saskatoon and Saskatchewan: Developing a cutting-edge research base infrastructure to assess reach, appropriateness and outcomes

Yigang Luo
Surgery
Medicine
University of Saskatchewan
Ex Vivo Kidney Perfusion under Normothermic Condition for Graft Preservation and Assessment before Implantation

Adil Nazarali & Bogdan Popescu
Pharmacy and Nutrition
University of Saskatchewan
Role of long-chain polyunsaturated fatty acids (PUFAs) in myelination: multidisciplinary approach that combines histological, molecular and synchrotron techniques

Gabriela Novotna & Randy Johner
Social Work
University of Regina
Access to Recovery for Saskatchewan People with (Dis)Ability and Substance Abuse Issues: From Needs Assessment to Building Capacity

David Palmer
Chemistry
Arts and Science
University of Saskatchewan
Development of novel antimicrobial agents based on inhibitors of diaminopimelate biosynthesis

Jagadish Rao
Surgery
Medicine
Regina Qu'Appelle Health Region
The Effect of Tranexamic Acid (TXA) on Ruptured Abdominal Aortic Aneurysms

Jennifer St. Onge
Research and Health Information Services
Regina Qu'Appelle Health Region
Prostate Cancer Microparticles as a Next Generation Screening Tool for Prostate Cancer

Caroline Tait, Cory Neudorf, & Peter Butt
Psychiatry
Medicine
University of Saskatchewan
Transforming Métis Health Services Together: Development of research governance partnerships between Métis peoples and the Saskatoon Health Region

Cheryl Waldner & Nathaniel Osgood
Large Animal Clinical Sciences
Veterinary Medicine
University of Saskatchewan
Exploring New Technologies to Support Investigation of Foodborne Disease

Philip Woods & Lorna Butler
Nursing
University of Saskatchewan
Interprofessional pathways for safe, healthy communities

Saskatchewan Research Chairs Program

The Saskatchewan Research Chairs Program is intended to attract, support, and retain top-quality research leaders who are working in a provincial priority area and who contribute to capacity building and knowledge sharing in those areas.

The Alzheimer Society of Saskatchewan (ASOS) and SHRF renewed the funding of a $1 million Research Chair in Alzheimer's Disease and Related Dementia, awarded to Dr. Darrell Mousseau, a researcher at the University of Saskatchewan (U of S). The Saskatchewan Research Chair is a partnership including ASOS, SHRF and U of S. The two funding partners each provide $100,000 per year for five years, while the University provides the necessary infrastructure and support of the Chair.

Health Research Group Grants

In May 2014, SHRF announced that the Health Research Group Grants program was cancelled and there would be no future competitions of this program. SHRF will honour its present commitments to Health Research Groups through 2016-17 fiscal year.

SHRF remains committed to building capacity by providing new funding mechanisms for researchers to conduct collaborative research. As a first step, the pilot program responded to feedback from our consultations and will provide opportunities for more researchers to access provincial funds, position groups of researchers for success in national funding competitions, and create impact for the people of Saskatchewan.

Research Connections Grant Recipients 2014-15

The Research Connections Program provides matching funds to support knowledge exchange through health research conferences, major meetings, research days, and other similar events that are organized and held in Saskatchewan. In 2014-15, the program experienced continued growth in demand and resources allocated.

Keith Bonham
Saskatchewan Cancer Research Conference

Rudy Bowen
Suicide: An Update on Assessment and Prevention

Josef Buttigieg
Regina Qu'appelle Health Region and University of Regina research network meeting

Julie DeGroot
Regina Qu'appelle Health Region Research Showcase 2014

Helen Nichol
Seeing the Light

Elan Paluck
Research Matters: Facilitating Research Connections

Ingrid Pickering
Fifth Annual CIHR-THRUST Retreat

James Dosman
The Built Environment and First Nations Health: Addressing & Redressing the Issues. Establishing a Blueprint for Canada

Rachel Engler-Stringer
Food Environments in Canada: Symposium and Workshop

Tasha Epp
Dog Days 2: Furthering Sharing of Sustainable Animal Management Ideas for Healthy First Nations Communities

Edward Krol
4th Western Canadian Medicinal Chemistry Workshop (WCMCW)

David Sanders
Protein Function, Structure and Malfunction Symposium

Catherine Trask
7th International Symposium: Safety & Health in Agricultural & Rural Populations: Global Perspectives (SHARP)

Joshua Lawson
Development of an international research initiative in childhood asthma

Ryan Meili
Global Health Conference with the title: " Immigrant and Refugee Health: perspectives and pathways"

Harpell Montgomery
Prairie Child Welfare Consortium: Symposium 2014

Debra Morgan
Priority planning for Dementia Research, KTE, and Policy in Saskatchewan

Hassanali Vatanparast
Saskatchewan Public Health Nutrition Research Network Symposium

Brandace Winquist
Applied Epidemiology for Improving the Health of Communities

Overview of Funds

With available funding, SHRF is able to fund a portion of the applications recommended for funding through the peer review process. The table below shows the number of applications and funding requested for each SHRF program in 2014-15 which we received, the amount recommended for funding by the review committee and the number we were able to fund with available resources.

SHRF Applications Received, Recommended, and Awarded 2014-15

SHRF Program	Received		Recommended		Awarded*			
	No.	$	No.	$	No.	Term (yrs)	SHRF $	Partner $
Collaborative Innovation Development Grants	74	2,662,519	31	1,131,873	24	1	**792,360**	**60,000**[1]
Establishment Grants	32	3,411,402	16	1,860,889	11	3	**1,275,902**	
Postdoctoral Research Fellowships	39	3,900,000	26	2,600,000	7	2	**650,000**	**50,000**[2]
Research Connections Grants	21	106,807	21	106,807	21	n/a	**106,807**	
Total	**166**	**10,080,728**	**94**	**5,699,569**	**63**		**2,825,069**	**110,000**

* Awarded amounts are for the full term of the grant (see also Grant Selection Process section).
1 $60,000 from Lung Association of Saskatchewan
2 $50,000 from Crohn's and Colitis Canada

Partnerships on SHRF-led Programs

SHRF partnered with the Lung Association of Saskatchewan to fund three well-rated asthma-related grants in the Collaborative Innovation Development Grant competition (i.e., Campanucci, Lawson, and Gordon).

SHRF partnered with Crohn's and Colitis Canada (CCC) to announce Dr. Juan-Nicolas Pena-Sanchez to work with a supervisory team of Lisa Lix, Jennifer Jones, and Gary Teare as the first recipient of the Crohn's and Colitis Postdoctoral Fellowship. Co-funded by SHRF and CCC the award provides $50,000 a year for two years to support research that increases our understanding of inflammatory bowel disease (IBD), its prevention, early detection, and cure.

Partnerships on Partner-led Programs

SHRF continues to advocate for the value of strong partnerships. The benefit of our partnership efforts goes beyond the dollars available. These opportunities allow us to maximize our investment in health research and leverage the sharing, promotion, and impact of health research. Providing matching funding demonstrates local support, and helps increase our chances for success and capacity in areas of strength. Also, offering matching funding connects Saskatchewan researchers to national and international networks.

SHRF responded to several competitive national opportunities to leverage funding to support high-caliber research in provincial priority areas. Successful partnership applications awarded in 2014-15 include team grants related to brain health, dementia care, nutritional health inequity, and primary health care reform. SHRF also responded to several other opportunities related to

topics including health system improvement, addressing health inequity for Aboriginal peoples, health technology innovation, and interdisciplinary patient-focused research.

The following are partner-led programs in which SHRF partnerships came to fruition in 2014-15:

→ SHRF partnered with CIHR and others on the Canadian Consortium on Neurodegeneration in Aging (CCNA), which aims to be the premier research hub for all aspects of research involving neurodegenerative diseases that affect cognition in aging. Announced by The Honourable Rona Ambrose, Minister of Health on September 10, 2014, the CCNA brings together 20 research teams and experts from across Canada to focus research on three themes: delaying the onset of dementia and related illnesses; preventing these illnesses from occurring; improving the quality of life of Canadians living with these illnesses and their caregivers. SHRF committed $500,000 over five years towards research taking place in Saskatchewan as part of this $31.5 million national initiative. SHRF will also participate in partnership forums and governance related to this initiative. Saskatchewan-based researchers are looking at issues in dementia care for rural and indigenous populations.

→ SHRF is providing matching funds for research in Saskatchewan as part of a $1.5 million multi-investigator research grant funded by Brain Canada through an international review process. SHRF will provide $75,000 over three years beginning in 2014-15, which will be matched by $75,000 of Brain Canada funds through the principal investigator. The team is looking at genetic alternations underlying brain disorders including severe migraine headache, epilepsy, autism, schizophrenia, and bipolar disorders.

→ SHRF provided funding for a grant successful in CIHR's Population Health Intervention Research competition, which funds research on timely population health interventions (i.e., programs, policies, and resource distribution approaches) that have been initiated by others and have the potential to impact health and health equity at the population level. Additionally, the research must be relevant to the CIHR signature initiative Pathways to Equity for Aboriginal Health. In partnership with regional health authorities and community-based organizations, the Saskatchewan team of researchers is studying inner city food environments and interventions to reduce nutritional health inequities.

→ SHRF is contributing $250,000 over five years to the $1 million Saskatchewan network funded as part of CIHR's SPOR Pan-Canadian Network in Primary and Integrated Health Care Innovations. CIHR requires SHRF 1:1 matching funding as part of this initiative. With tri-partite leadership from the University of Saskatchewan, Saskatoon Health Region, and Ministry of Health, the Saskatchewan Network will develop a collaborative network of researchers, physicians, community members, and policy-makers that will focus on generating new evidence in primary and integrated health care effectiveness, efficiency, and access across the care spectrum. The Saskatchewan team includes individuals from across the province including researchers, physicians, and policymakers who will work together to improve health equity, specifically in indigenous and rural areas. The focus will be on prevention and how to better provide services to patients across their life spans (i.e., early childhood to older adults).The development of the SPOR Saskatchewan network comes at an opportune time given the ambitious and far-reaching systemic changes underway in Saskatchewan health-care system, in particular relevant to this application, the Lean Initiative and Primary Health Care reform.

The table below shows SHRF's contributions to partner-led programs.

SHRF Contributions to Partner-led Programs 2014-15

Partner-led Program	Awarded*		
	No.	Term (yrs)	SHRF $
Multi-Investigator Research Grant (Brain Canada)	1	3	75,000
SPOR Network in Primary and Integrated Health Care Innovations (CIHR)	1	5	250,000
Canadian Consortium on Neurodegeneration in Aging (CIHR)	1	5	500,000
Population Health Intervention Research (CIHR)	1	1	200,000
TOTAL	**4**		**1,025,000**

* Awarded amounts are for the full term of the grant.

Partner-led Program Grant Recipients 2014-15

John Howland
Physiology
Medicine
University of Saskatchewan
W. Garfield Weston Foundation - Brain Canada: Multi-Investigator Research Grant
Brain Channelopathies – Target Validation and Novel Therapeutic Strategies

Nazeem Muhajarine
Community Health and Epidemiology
Medicine
University of Saskatchewan
Canadian Institutes of Health Research: SPOR Network in Primary and Integrated Health Care Innovations
Network Development Funds

Debra Morgan
Canadian Centre for Health and Safety in Agriculture
Medicine
University of Saskatchewan
Canadian Institutes of Health Research: Canadian Consortium on Neurodegeneration in Aging
Issues in dementia care for rural and indigenous populations

Rachel Engler-Stringer
Community Health and Epidemiology
Medicine
University of Saskatchewan
Canadian Institutes of Health Research: Population Health Intervention Research
Changing Inner City Food Environments: Interventions to Address Nutritional Health Inequities

Program Support

Research Management System

The 2014-15 competitions were the first to utilize SHRF's newly developed comprehensive online Research Management System (RMS). Funding applications were submitted and reviewed using the RMS. SHRF continually makes improvements to the RMS based on feedback from applicants and peer reviewers.

Feedback Surveys

Following the Spring (i.e., establishment grants and fellowship) and Fall (i.e., collaborative innovation development grants) application deadlines, SHRF disseminated online surveys to applicants and administrators to gather feedback on application materials, the RMS, and communications with SHRF staff.

Members of SHRF peer review committees complete an online survey following the completion of the review meeting. Reviewers provide SHRF with feedback and suggestions for improving the review guidelines and criteria, application components, RMS usability and instructions, communication with SHRF staff, committee composition, and the review meeting.

Overall, SHRF received strong support and confidence for how it manages its application and review processes from survey respondents. SHRF implements suggestions where possible to improve the applicant and reviewer experience.

Canadian Common CV

SHRF continues to use the Canadian Common CV (CCV) for applicants to our funding programs. This web-based system aims to reduce the workload for the research community by allowing researchers to maintain their CCV data in a single repository and use it to apply to over 30 different funding organizations across Canada. SHRF uses the information in the peer review process. The CCV continues to make improvements and SHRF takes part on the CCV Advisory Committee.

Remote review meeting technology

For the first time, SHRF conducted review meetings using Web-Ex Training Centre. This powerful remote meeting tool allowed review committee members from across Canada to take part in SHRF's Collaborative Innovation Development Grant review committees without the extra time and costs of travel to Saskatoon. The committee Chair was the only member that travelled to Saskatoon. Feedback on the remote review meeting from committee members from Victoria, BC to St. John's NFLD was very positive.

Research Funding Events

Research Funding Advisory Forum

SHRF consulted with health research leaders at its fifth annual Research Funding Advisory Forums (RFAF) that were held in Saskatoon and Regina in June 2014. The Forums facilitate a stronger connection to the health research community and provide an opportunity to meet with the Associate Deans of Research in health areas and other senior research administrators to exchange updates, questions, and feedback.

Orientation

Orientation sessions are held for new grantees and awardees to provide them with information about SHRF, grant management, and to introduce them to SHRF staff. Key research support personnel at both universities are also invited to attend.

Orientation sessions were held in Saskatoon and Regina for recipients from our spring (i.e., establishment grants and research fellowships) and fall (i.e., collaborative innovation development grants) competitions.

Funding Facts Information Sessions

SHRF hosted two "Funding Facts" information sessions in December of 2014. One was held at the University of Saskatchewan, and one was held at the University of Regina. Both sessions were well attended by researchers and research support personnel.

Additionally, information sessions were held in July in Saskatoon and Regina to present information on the recently announced Collaborative Innovation Development Grant competition.

Communications and Outreach

SHRF uses a portion of its assets and resources to encourage the sharing and use of health research to create health and social benefits.

Sponsorships

→ SHRF sponsored a lunch at the *Industry Talks* event at the University of Saskatchewan. The event is hosted by the Student Employment and Career Centre (SECC). The event offers employers an opportunity to engage with all students, in all disciplines and years of study (i.e., undergraduate, graduate, and alumni) at industry-specific career information sessions. This was an opportunity for SHRF to raise our profile with industry.

→ SHRF is a *Bronze Supporter* for the 2015 Canadian Cancer Research Conference. The biennial conference is hosted by the Canadian Cancer Research Alliance (CCRA), a collaborative of 35 federal research funding programs/agencies, provincial research agencies, provincial cancer care agencies, cancer charities and other voluntary associations. The event will take place in the 2015-16 fiscal year.

→ SHRF sponsored and accompanied researchers and industry people to Edmonton for the eHealth Innovations Partnership Program (eHIPP) Workshop. The workshop was designed to spark collaborative discussions, create new partnerships and communicate how to prepare for eHIPP funding. SHRF also held a post eHIPP debrief session to gather feedback about the event, and gain input from those who attended on how SHRF might maintain these relationships.

Publications

SHRF published its second annual edition of *Research for Health* in December 2014. The magazine features prominent and interesting researcher stories, articles, and updates to appeal to the widest range of provincial readership. This year we more than tripled the distribution of our magazine to ensure a wider reach. The publication was distributed to hospitals, doctors' offices and placed in the seat pockets of West Wind Aviation's aircraft (Pronto and ExpressAir). This year we plan to grow our distribution network, and expand and diversify our stories and editorial content to include agencies and organizations similar to yours.

SHRF also published: *Weechihitotan (Let's help and support each other) – The Value of Aboriginal Health Research in Saskatchewan*; and *Defining a Health Strategy for Saskatchewan: Input and Recommendations from Stakeholder Consultation*.

Knowledge Translation

→ SHRF hired a Knowledge Mobilization Officer to assist in implementing knowledge translation models, processes and activities including methods for increasing strong flow of information to relevant government ministries.

→ SHRF encourages researchers and their institutions to report on research and outcomes. SHRF collaborates with the Universities on news releases and other activities aimed at increasing knowledge translation. In addition, through its five-year follow up study, SHRF tracks the activities of its funded researchers.

→ SHRF funded researchers are expected to incorporate knowledge translation (KT) of their research to make it more accessible and usable. For example, researchers have built KT based websites, cross-cultural videos, program evaluation work books, and recipe cards as well as hosted community meetings, and presented at conferences, workshops and collaborative sessions.

→ SHRF continues to be part of a dynamic network of knowledge mobilization professionals. Employees from SHRF were involved in the initial planning discussions for KM in the AM, a local knowledge mobilization network. SHRF attends the regular meetings and workshops. Also, SHRF attended the 2014 Canadian Knowledge Mobilization Forum which was held in Saskatoon.

→ SHRF joined Twitter in July 2014. The social media tool is being used to publicly interact with users by sharing health research stories, engaging with a broader audience, and raising the profile of health research in the province. SHRF continues to build a strong Twitter following.

→ SHRF facilitated the proclamation by the Government of Saskatchewan of "Health Research Week" in 2014. During the week of November 30 – December 6, a number of agencies, including SHRF, publicized contributions made by health researchers in Saskatchewan and raised awareness of the province's health research enterprise.

Achievement Award Review Panel

Through our annual Achievement Award, SHRF honours those individuals in the health research community who inspire us with their drive, leadership, ingenuity, and achievement. Nominees must have made advances in their field of health research, provided training and mentorship, attracted research expertise, and contributed significantly to health research in Saskatchewan. Nominations for this Award are put forward by their colleagues and undergo a rigorous selection procedure conducted by a blue-ribbon panel of leaders in Canadian health research that includes researchers, clinicians, and senior funding agency representatives from across the country. The 2014-15 review panel consisted of the following three people:

Adam Baxter-Jones
College of Graduate Studies and Research
University of Saskatchewan

Sonya Corkum
Knowledge Translation Consultant

Kevin Keough
Executive Director
Alberta Prion Research Institute

Santé! Awards Evening

Nearly 230 people attended the 2014 Santé! Awards Evening, SHRF's annual celebration of health research successes and excellence in Saskatchewan. The Achievement Award winner and Top Researcher Awards were announced at the event. SHRF increased their sponsorship efforts for this event and generated the greatest amount of support they ever received.

SHRF announced John Gordon as the Achievement Award winner for 2014. Dr. Gordon is a Professor in the Division of Respirology, Critical Care and Sleep Medicine at the University of Saskatchewan. He is an expert in the field of immune regulation and airway disease and is internationally recognized as a major force in immunology, conducting ground-breaking work on inflammatory diseases, such as asthma. His scientific contributions at the local, national, and international level have led to widespread recognition of both his expertise and innovation.
Top Researcher Awards were given to the top-rated researchers in the biomedical and socio-health, systems, and clinical competitions of the Establishment Grant and Postdoctoral Research Fellowship programs based upon submitted applications that have been peer reviewed and scored.

The top award winners in the Establishment Grant program were:

→ **Biomedical:** Dr. Lane Bekar of the College of Medicine at the University of Saskatchewan. Dr. Bekar`s work focuses on understanding how the immune system changes under conditions of chronic stress and its role in the increases of chronic neurodegenerative conditions seen today in our society.

→ **Socio-health, systems, and clinical:** Dr. Stephan Milosavljevic of the College of Medicine at the University of Saskatchewan. Dr. Milosavljevic's research focuses on investigating the use of walking as a health strategy for chronic low back pain (CLBP), especially among farmers.

The top award winners in the Postdoctoral Fellowship program were:

→ **Biomedical:** Yalena Amador Cañizares from the College of Medicine at the University of Saskatchewan, working with supervisor Dr. Joyce Wilson. Dr. Cañizares aims to discover how Hepatitis C Virus (HCV) infections are promoted at a cellular level and then use the information to develop new ways to inhibit the virus and treat HCV infected patients; and

→ **Socio-health, systems, and clinical:** Dr. Amanda Froehlich Chow of the College of Kinesiology at the University of Saskatchewan in socio-health research, with supervisor Dr. Louise Humbert. Dr. Chow`s study looks into the feasibility and effectiveness of new, educator-focused intervention that aims to promote physical literacy in early years` children, especially at rural childcare centres.

Impact Analysis and Evaluation

SHRF is committed to evaluating the long-term outcomes and impact of our funding programs. The area of Impact and Evaluation was active this year with several initiatives to highlight.

SHRF continued to monitor and assess the research it funds through the final report and five-year follow-up procedures. Evaluating our funding programs is important in measuring the extent to which program goals are achieved and understanding the researchers' contribution to Saskatchewan's health research enterprise. Our goal is to also measure the impact of the program on researchers' career, teaching and capacity building, subsequent research, and on the economy.

SHRF maintained its collaborative work on research impact assessment with the National Alliance of Provincial Health Research Organizations (NAPHRO). We also collaborated on several national initiatives, making SHRF not only visible, but also a leader in impact analysis and evaluation.

NAPHRO Impact Analysis Group (IAG)

A vision for what the IAG would like to accomplish in the next two years was developed. The IAG's first priority was to propose the standardization of reporting funding dollars (i.e., provincially, federal agencies, and non-profits), and determine the best way to measure capacity (i.e., number of researchers doing health research). Other initiatives include:

- → Create a NAPHRO-wide approach to developing case study methodology for assessing and reporting on research impact;
- → Work with UBER Research to standardize health research definitions;
- → Update bibliometric and econometric data; and
- → Create a definition of leveraged dollars for health research.

Working with the IAG, SHRF collaborated on a report that utilized common econometric data for all jurisdictions in Canada. Science Metrix completed the econometrics study and final results on provincial share of federal research funding, success rates, patents, licenses, employment, and education which were delivered in print, and database form.

Weechihitotan

SHRF published *Weechihitotan (Let's help and support each other) – The Value of Aboriginal Health Research in Saskatchewan*. Using a case study approach similar to SHRF's last publication, *Measuring the Value of Saskatchewan's Health Research*, the agency demonstrates the impact of Aboriginal health research in Saskatchewan. This area is of strategic relevance to the province and SHRF can play an important role by demonstrating the importance and success of health research, and supporting more research in this area. The Indigenous Peoples Health Research Centre (IPHRC) was a collaborator on the final product which will be used strategically in communications with CIHR and government.

Innovation Systems – Case study

Three NAPHRO agencies have participated in a pilot project looking at Innovation Systems at the provincial level. Two case studies and a short narrative on SHRF's role and innovation in Saskatchewan health research was created in collaboration with several organizations in the province. SHRF will edit and publish this piece in the 2015-16 fiscal year.

Research Canada Public Opinion Poll

SHRF partnered with Research Canada in the fifth national public opinion poll in the *CanadaSpeaks* series. The survey measured the public's level of support for health research and their interest in public participation in clinical research. Data from the national results linked to past surveys. SHRF and other partners have worked with Research Canada to add new questions. In parallel to the national survey, a significant sample of Saskatchewan citizens was also surveyed.

Pilot Program – Evaluation

SHRF hired a consulting company to carry out an external evaluation on the Collaborative Innovation Develop (CID) pilot program. We surveyed program applicants and research administrators/facilitators to obtain feedback on the call for proposals and the application process. Specifically, we asked respondents to comment on: 1) objectives of program; 2) criteria used; 3) process (application); 4) review process (peer review committees); and 5) demographics. Results were shared with respondents and used to improve the program in its next call.

Canadian Health Services and Policy Research Alliance – Impact Working Group

SHRF has been participating in a working group specifically looking to identify what frameworks and indicators are best to measure the impact of health services related research. SHRF will use the knowledge gained from this activity to improve its own impact assessment of health services related research.

Alzheimer Chair Review 2014

Saskatchewan Research Chair in Alzheimer's Disease and Related Dementia

Incumbent: Dr. Darrell Mousseau

In 2014, the Saskatchewan Research Chair in Alzheimer's Disease and Related Dementia concluded its five-year term. The Chair review provides insight into the impact achieved from the investment and the research activity produced during that five-year period.

> "Our ability to treat people early could have tremendous benefits. If we can affect and have some sort of an impact on even 10 per cent of the population, that's going to ultimately help a lot of people, not only the patients themselves, but caregivers and the healthcare system."
>
> Dr. Darrell Mousseau. Saskatchewan Research Chair

The goals and ends of research are not finite, nor are created in detail due to the long-term nature of health research. SHRF has chosen to evaluate this Chair and its incumbents at the five-year potential renewal time frame using the Canadian Academy of Heath Sciences (CAHS) return on investment in health research framework.

The first Saskatchewan Research Chair in Alzheimer's Disease and Related Dementia, through its incumbent Dr. Darrell Mousseau, has demonstrated significant activity in most of the CAHS impact categories. From an organizational viewpoint, this first Chair has demonstrated a number of positive benefits to the organization. SHRF's been able to find a willing and engaged investment partner in the Alzheimer Society of Saskatchewan, and has been able to leverage a combined investment into a desired area of health research for the province.

"Alzheimer's disease is not a normal part of aging. Symptoms include having difficulty remembering things, making decisions and performing everyday activities. These changes can affect the way a person feels and acts. There is currently no way to stop the disease, but research is improving the way we provide care. Our support for this Research Chair is critical as we continue to search for a cure."

Joanne Bracken, Chief Executive Officer of the Alzheimer Society of Saskatchewan

Saskatchewan Health Research Foundation

Financial Statement

For the year ending March 31, 2015

Report of Management

Management is responsible for the integrity of the financial information reported by the Saskatchewan Health Research Foundation.

Fulfilling this responsibility requires the preparation and presentation of financial statements and other financial information in accordance with Canadian generally accepted accounting principles that are consistently applied, with any exceptions specifically described in the financial statements.

The accounting system used by the Foundation includes an appropriate system of internal controls to provide reasonable assurance that:

- → transactions are authorized;
- → the assets of the Foundation are protected from loss and unauthorized use; and
- → the accounts are properly kept and financial reports are properly monitored to ensure reliable information is provided for preparation of financial statements and other financial information.

To ensure management meets its responsibilities for financial reporting and internal control, board members of the Foundation discuss audit and financial reporting matters with representatives of management at regular meetings. Foundation board members have also reviewed and approved the financial statements with representatives of management.

The Provincial Auditor of Saskatchewan had audited the Foundation's statement of financial position, statements of operations, change in net financial assets and cash flow. Her responsibility is to express an opinion on the fairness of management's financial statements. The Auditor's report outlines the scope of her audit and her opinion.

Gordon McKay
Board Chair

Patrick Odnokon
Interim Chief Executive Officer

PROVINCIAL AUDITOR
of Saskatchewan

INDEPENDENT AUDITOR'S REPORT

To: The Members of the Legislative Assembly of Saskatchewan

I have audited the accompanying financial statements of the Saskatchewan Health Research Foundation, which comprise the statement of financial positon as at March 31, 2015, and the statement of operations, statement of change in net financial assets, and statement of cash flows for the year then ended, and a summary of significant accounting policies and other explanatory information.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with Canadian public sector accounting standards for Treasury Board's approval, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

My responsibility is to express an opinion on these financial statements based on my audit. I conducted my audit in accordance with Canadian generally accepted auditing standards. Those standards require that I comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my audit opinion.

Opinion

In my opinion, the financial statements present fairly, in all material respects, the financial position of the Saskatchewan Health Research Foundation as at March 31, 2015, and the results of its operations, changes in its net financial assets, and its cash flows for the year then ended in accordance with Canadian public sector accounting.

Judy Ferguson

Regina, Saskatchewan
June 29, 2015

Judy Ferguson, FCPA, FCA
Provincial Auditor

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STATEMENT OF FINANCIAL POSITION

As at March 31

	2015	2014
Financial assets		
Cash and cash equivalents (Schedule 2)	$ 108,070	$ 524,849
Accrued interest receivable	51,032	56,804
Accounts receivable	243,372	150,863
Short-term investments (Schedule 2)	3,250,000	2,700,000
Long-term investments (Schedule 2)	2,453,443	2,756,752
	6,105,917	6,189,268
Liabilities		
Accounts payable and accrued liabilities	40,813	387,695
Payroll liabilities	19,415	11,297
Grants payable	5,613,971	5,428,259
	5,674,199	5,827,251
Net financial assets	431,718	362,017
Non-financial assets		
Tangible capital assets (Note 3)	61,494	76,100
Prepaid expenses	12,824	21,329
	74,318	97,429
Accumulated surplus	$ 506,036	$ 459,446

Commitments (Schedule 3, Notes 2(e), and 5)

(See accompanying notes to the financial statements)

STATEMENT OF OPERATIONS

For the year Ended March 31

	2015 Budget (Note 10)	2015 Actual	2014 Actual
Revenues			
Government Contributions			
Ministry of Health	$ 5,830,000	$ 5,830,004	$ 5,783,999
Ministry of Advanced Education	400,000	400,000	400,000
Health Quality Council	60,000	60,000	60,000
Non-Government Contributions			
Alzheimer's Society of Saskatchewan	100,000	100,000	100,000
Canadian Chiropractic Research Foundation	-	-	47,694
Crohn's & Colitis Canada	50,000	25,000	-
Heart and Stroke Foundation of Canada	100,000	100,000	100,000
Saskatoon City Hospital Foundation	100,000	-	-
Schizophrenia Society of Saskatchewan	-	20,000	20,000
Terry Fox Research Institute	-	50,000	25,000
Other Contributions (Note 13)	180,000	60,000	-
Donations and Sponsorships	25,000	14,696	9,905
Other Revenue (Note 7)	136,690	223,138	245,333
Total Revenues	6,981,690	6,882,838	6,791,931
Expenses			
Research funding			
Saskatchewan Health Research Foundation led programs	4,990,624	4,803,099	4,513,360
Partner led programs (Note 6a)	640,000	625,000	1,116,455
Program support	217,635	192,350	220,423
Communication & Outreach	360,443	321,321	247,375
Impact & Evaluation	142,842	44,430	140,571
Leadership and management			
Board	48,148	25,057	34,980
Administrative	914,913	824,991	1,146,242
Total Expenses (Schedule 1)	7,314,605	6,836,248	7,419,406
Annual (deficit) surplus	$ (332,915)	46,590	(627,475)
Accumulated surplus, beginning of year		459,446	1,086,921
Accumulated surplus, end of year		$ 506,036	$ 459,446

(See accompanying notes to the financial statements)

STATEMENT OF CHANGE IN NET FINANCIAL ASSETS

For the Year Ended March 31

	2015	2014
Annual surplus (deficit)	$ 46,590	$ (627,475)
Acquisition of tangible capital assets	(28,805)	(83,576)
Amortization of tangible capital assets	43,411	37,271
	14,606	(46,305)
Acquisition of prepaid expense	(39,828)	(84,984)
Use of prepaid expense	48,333	79,268
	8,505	(5,716)
Increase (Decrease) in net financial assets	69,701	(679,496)
Net financial assets, beginning of year	362,017	1,041,513
Net financial assets, end of year	$ 431,718	$ 362,017

(See accompanying notes to the financial statements)

STATEMENT OF CASH FLOWS

For the Year Ended March 31

	2015	2014
Operating transactions		
Annual surplus (deficit)	$ 46,590	$ (627,475)
Non-cash items included in annual surplus:		
Amortization of tangible capital assets	43,411	37,271
Bond amortization	3,309	3,309
Net change in non-cash working capital items:		
Accrued interest receivable	5,772	10,912
Accounts receivable	(92,509)	50,074
Prepaid expenses	8,505	(5,716)
Accounts payable and accrued liabilities	(346,882)	351,954
Payroll liabilities	8,118	(4,989)
Grants payable	185,712	580,397
Cash (used)/provided by operating transactions	(137,974)	395,737
Capital transactions		
Cash used to acquire tangible capital assets	(28,805)	(83,576)
Cash applied to capital transactions	(28,805)	(83,576)
Investing transactions		
Purchase of investments	(2,950,000)	(2,850,000)
Proceeds from disposal and redemption of investments	2,700,000	2,966,000
Cash (used)/provided by investing transactions	(250,000)	116,000
(Decrease) increase in cash and cash equivalents	(416,779)	428,161
Cash and cash equivalents, beginning of year	524,849	96,688
Cash and cash equivalents, end of year	$ 108,070	$ 524,849

(See accompanying notes to the financial statements)

SASKATCHEWAN HEALTH RESEARCH FOUNDATION
NOTES TO THE FINANCIAL STATEMENTS
MARCH 31, 2015

1. Establishment of the Foundation

On January 31, 2003, *The Saskatchewan Health Research Foundation Act* (S.S. 2002, c.S-21.1) came into force establishing the Saskatchewan Health Research Foundation (Foundation). The Foundation is responsible for organizing, managing and allocating most provincial health research funding in Saskatchewan and for ensuring that supported research fits with the Province's health research priorities and leads to benefits for health and the health system in Saskatchewan.

2. Accounting Policies

Pursuant to standards established by the Public Sector Accounting Board (PSAB), the Foundation is classified as an "other government organization." The Foundation uses generally accepted accounting principles applicable to government. The following accounting principles are considered to be significant.

a) Basis of accounting

The financial statements are prepared using the accrual basis of accounting.

b) Revenue

The Foundation's main revenue for operations has been contributions from the Ministry of Health – General Revenue Fund with other revenue coming from partnerships, interest, recoveries and miscellaneous revenue.

Contributions from the Ministry of Advanced Education are used for federal partnership opportunities with Canadian Institutes of Health Research (CIHR) (see note 6).

Funds not spent during the term of a research grant or award compose recoveries if the grant or award expense was recognized in the prior years.

Government contributions are recognized as revenue when the transfer is authorized and any eligibility criteria are met, except to the extent that contribution stipulations give rise to an obligation that meets the definition of a liability. Contributions are recognized as deferred revenue when contribution stipulations give rise to a liability. Contributions are recognized in the statement of operations as the stipulation liabilities are settled.

c) Measurement uncertainty

The preparation of financial statements in accordance with Public Sector Accounting Board (PSAB) accounting principles requires the Foundation's management to make estimates and assumptions that affect the reported amounts of assets and liabilities and the disclosure of commitments at the date of the financial statements and the reported amounts of revenue and expenses during the period. Actual results could differ from those estimates.

d) Tangible capital assets

The recognition and measurement of tangible capital assets is based on their service potential. Purchases of furniture and office equipment over $250 and computer hardware and software over $500 are recorded at cost as a capital asset. Purchases below these amounts are expensed as incurred. Amortization is recorded on a straight-line basis as follows:

Furniture	10 years
Office Equipment	5 years
Computer Hardware and Software	3 years
Leasehold Improvements	length of lease

Normal maintenance and repairs are expensed as incurred.

e) Research grants and awards expense

Grants and awards expense is recorded when eligibility has been determined and the grant and or award has been authorized. Awarded funds are sent to the recipients' home institution to manage and disburse. Funds not spent during the term of a research grant or award reduces the respective expense if the expense was recognized in the same year.

Internally administered awards:

The Foundation holds annual funding competitions through which applications are adjudicated by experts based on excellence and relevance. Terms vary and are often multi-year. For internally administered multi-year grants and awards, the Foundation assesses eligibility and provides authorization on a yearly basis (see Schedule 3, Schedule of Future Research Funding Commitments).

Externally administered awards:

For some partnership programs, the Foundation's partner administers the grants and awards. For example, CIHR currently administers PHSI grants and awards. For externally administered multi-year grants and awards where full grants and awards are authorized at the commencement, the Foundation records the full amount of the expense in the year that authorization for funding is received from CIHR.

f) Investments

Investments are valued at amortized cost.

3. Tangible Capital Assets

	Furniture and Equipment	Leasehold Improvements	2015 Totals	2014 Totals
Opening cost	$ 215,289	$ 48,848	$ 264,137	$ 180,561
Additions during the year	28,805	-	28,805	83,576
Disposals during the year	16,256	-	16,256	-
Closing cost	227,838	48,848	276,686	264,137
Opening accumulated amortization	139,189	48,848	188,037	150,766
Amortization for the year	43,411	-	43,411	37,271
Disposals during the year	16,256	-	16,256	-
Closing accumulated amortization	166,344	48,848	215,192	188,037
Net book value of tangible capital assets	$ 61,494	$ -	$ 61,494	$ 76,100

4. Designated Assets

The Foundation is holding $125,588 as designated assets to be disbursed in future years; $72,000 for the Quality Improvement Chair and $53,588 for the Spinal Cord Injury Chair.

5. Lease Commitments

At March 31, 2015, the Foundation had the following lease commitments:

	2016	2017	2018	2019
Office Lease*	$ 169,377	$ 178,063	$ 89,032	$ -
Postage meter lease	1,986	1,986	1,986	1,159
	$ 171,363	$ 180,049	$ 91,018	$ 1,159

*The office lease was renewed for 5 years during 2012-13.

6. a) Partner-led Programs

The Foundation periodically enters into funding partnerships, often spanning more than one year, to help achieve its goals and objectives. In 2014-15 the Foundation provided research funding through the following partnerships:

i) Canadian Consortium on Neurodegeneration in Aging (CCNA)

In a 5 year partnership with CCNA that started in 2014-15, the Foundation matched funding of $100,000 from the CIHR on a 1:1 basis to support Saskatchewan researchers and research projects in the area of Aging.

ii) CIHR Partnership for Population Health Intervention Research

The foundation partnered with CIHR on the population health intervention research and invested $200,000 in 2014-15 in this area.

iii) Strategy for Patient Oriented Research (SPOR) Primary Health Care Network – Phase 2

In a 5 year partnership with CIHR primary health care network, the Foundation invested $250,000 to support the phase 2 grants.

iv) Dr. Terrance Snutch (Brain Canada – Multi-Investigator Research Grant)

The foundation supported the Brain Canada's Multi-Investigator Research Grants with $75,000 in a partnership with Dr. Terrance Snutch at the University of British Columbia.

b) Saskatchewan Research Chairs

Since 2009-10, the Foundation has been funding a five-year Saskatchewan Research Chair in Alzheimer Disease and Related Dementia, in 1:1 funding partnership with the Alzheimer Society of Saskatchewan. The Foundation receives the partner's contribution on a quarterly basis, expenses the chair awards on an annual basis, and sends the partner and Foundation funds together to the award holder's home institution. A new five-year Saskatchewan Research Chair for Clinical Stroke Research was awarded in 2012-13 in equal partnership with Heart and Stroke Foundation. The Foundation has another research chair partnership where the award has not yet been made. Partner funds flow to the Foundation when there is a successful candidate in place.

c) Other Partnered Grants and Awards

During 2014-15, Terry Fox Research Institute and Crohn's and Colitis Canada contributed $50,000 and $25,000 respectively to partner on the Postdoctoral Fellowship awards with the Foundation.

7. Other Revenue

In 2014-15, other revenue generated by the Foundation included interest of $103,185 and recoveries of $119,853.

8. Related Party Transactions

Included in these financial statements are transactions with various Saskatchewan Crown Corporations, ministries, agencies, boards and commissions related to the Foundation by virtue of common control by the Government of Saskatchewan, and non-Crown corporations and enterprises

subject to joint control or significant influence by the Government of Saskatchewan (collectively referred to as "related parties").
Routine operating transactions with related parties are recorded at the agreed upon rates charged by those organizations and are settled on normal trade terms. These transactions and amounts outstanding at year-end are as follows:

	2015	2014
Miscellaneous revenue:		
Health Quality Council	$ 62,500	$ 60,000
University of Regina	2,500	-
University of Saskatchewan	124,853	130,975
Research grant, administrative and occupancy expenses:		
Capital Pension Plan - employee benefits	47,574	51,206
Regina Qu'Appelle Health Region	6,500	-
Saskatchewan Opportunities Corporation – Innovation Place	184,191	174,707
SaskTel	7,985	9,111
University of Regina	1,144,596	1,232,186
University of Saskatchewan	4,220,171	4,409,095
Other	4,543	2,737
Accounts receivable	8,577	1,674
Accounts payable and accrued liabilities	939	20,440
Grants payable	5,613,971	5,428,259

The Foundation pays Provincial Sales Tax to the Ministry of Finance on all its taxable purchases. Taxes paid are recorded as part of the cost of those purchases.

Other transactions with related parties and amounts due to or from them are described separately in these financial statements and the notes thereto.

9. Financial Instruments

The Foundation has the following financial instruments: accrued interest receivable, accounts receivable, investments, accounts payable, and grants payable. The following paragraphs disclose the significant aspects of these financial instruments. The Foundation has policies and procedures in place to mitigate the associated risks.

a) Significant terms and conditions

There are no significant terms and conditions associated with the financial instruments, other than investments, that may affect the amount, timing, and certainty of future cash flows. Significant terms and conditions for investments are described separately on Schedule 2 of these financial statements.

b) Interest rate risk

The Foundation is exposed to interest rate risk when the value of its financial instruments fluctuates due to changes in market interest rates. As the Foundation seldom disposes of investments prior to maturity, this risk is minimal.

The Foundation's receivables and payables are non-interest bearing. Due to the short-term nature of these, as well as cash and short-term investments, interest rate risk is minimal.

As market interest rates fluctuate the market value of long-term investments moves in the opposite direction. This risk will affect the price the Foundation could sell the investments for prior to maturity.

c) **Credit risk**

The Foundation is exposed to credit risk from potential non-payment of accounts receivable or investment income and principal.

Most of the Foundation's receivables are from the provincial government; therefore the credit risk is minimal.

The Foundation's investments consist of provincial and federal government bonds, promissory notes, treasury bills and bankers acceptances with large Canadian banks. Therefore, credit risk for investments and related accrued interest receivable is minimal.

d) **Fair value**

For the following financial instruments, the carrying amounts approximate fair value due to their immediate or short-term nature:

Accrued interest receivable
Accounts receivable
Short-term investments
Accounts payable
Grants payable

The fair value of long-term investments is $2,457,418. The quoted market values of the long-term investments are considered to be the fair values.

10. **Budget**

The operating budget was approved by the Foundation's Board on April 10, 2014.

11. **Pension Plan**

The Foundation has been a participating employer in the Capital Pension Plan, a defined contribution pension plan. Eligible employees make monthly contributions of 7% of gross salary with the Foundation contributing 7.5% of gross salary. The Foundation's financial obligation is limited to making required contributions. During the year, the Foundation's total contributions were $47,574 (2013-14 $51,206).

12. **Comparative Information**

Certain prior year amounts have been reclassified to conform with the current year's presentation.

13. **Other Contributions**

Other Contributions represent the potential new partnerships the Foundation explores from the non-government sources. During 2014-15, the Foundation partnered 1:1 with the Lung Association of Saskatchewan on 3 Collaborative Innovation Development grants totalling $120,000.

SCHEDULE OF EXPENSES BY OBJECT

For the Year Ended March 31

	2015		2014
	Budget	Actual	Actual
	(Note 10)		
Advertising and promotion	$ 46,500	$ 45,572	$ 21,619
Amortization	47,146	43,411	37,271
Board expenses	48,148	25,058	34,980
Employee benefits	143,775	136,035	140,064
Employee salaries	679,271	637,375	982,245
Grants and awards	5,630,624	5,428,099	5,629,815
Office expenses	95,317	77,932	63,061
Office space	152,895	165,661	160,897
Professional Fees	281,768	165,428	243,612
Publications	55,000	50,432	29,557
Review committee expenses	33,050	19,590	19,467
Travel and meetings	101,111	41,655	56,818
	$ 7,314,605	$ 6,836,248	$ 7,419,406

(See accompanying notes to the financial statements)

SCHEDULE OF INVESTMENTS

As at March 31, 2015

	MATURITY DATE	CARRYING VALUE	EFFECTIVE RATE
Cash and cash equivalents:			
Cash		$ 107,200	
TD Waterhouse - cash		870	
		108,070	
Short-term investments:			
Manulife Bank GIC	1-May-2015	100,000	2.35
Royal Bank GIC	1-May-2015	200,000	2.15
Equitable Trust GIC	1-May-2015	100,000	2.35
Royal Bank GIC	13-Jul-2015	350,000	1.90
Bank of Montreal GIC	31-Jul-2015	300,000	1.71
Bank of Nova Scotia GIC	9-Oct-2015	250,000	2.20
BMO Advisor Advantage GIC	17-Dec-2015	700,000	1.73
Bank of Nova Scotia GIC	25-Feb-2016	700,000	1.35
Bank of Nova Scotia GIC	18-Mar-2016	550,000	1.40
		3,250,000	
Long-term investments:			
Bank of Nova Scotia GIC	19-Jun-2016	900,000	2.000
Canadian Tire Bank GIC	12-Jul-2016	100,000	2.350
Royal Bank GIC	12-Jul-2016	100,000	2.100
TD Bank bond	2-Aug-2016	353,443	2.948
Bank of Nova Scotia GIC	9-Oct-2016	500,000	2.300
Bank of Nova Scotia GIC	19-Dec-2016	200,000	2.010
Bank of Nova Scotia GIC	18-Dec-2017	300,000	2.130
		2,453,443	
		$ 5,811,513	

(See accompanying notes to the financial statements)

SCHEDULE OF FUTURE RESEARCH FUNDING COMMITMENTS

As at March 31, 2015

The Future Research Funding commitments at March 31, 2015 were as follows: Note 2(e)

YEAR		SASKATCHEWAN HEALTH RESEARCH FOUNDATION PROGRAMS
2016	$	1,394,415
2017		426,000
2018		100,000
2019		100,000
	$	2,020,415

(See accompanying notes to the financial statements)

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Building a healthy Saskatchewan through health research

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